



# HBA of Metro Orlando Payment Plan NEW MEMBER FORM

The HBA of Metro Orlando's 3-month payment plan- A new member service customized to fit your needs.

**In order to take advantage of this affordable payment plan, please sign below and provide credit card information. The HBA of Metro Orlando will ONLY accept signed agreements from a selected payment option listed below.**

This agreement is executed this day \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_.

I, \_\_\_\_\_ an official representative for  
(PRINT COMPANY CONTACT NAME)

\_\_\_\_\_ is renewing our membership with the HBA of Metro Orlando  
(PRINT COMPANY NAME)

and will take advantage of the HBA of Metro Orlando Payment Plan. As such, I/we agree to the following terms and conditions:

My signature authorizes the HBA of Metro Orlando to debit the credit card or debit card I have provided below in order to pay for my annual dues to the HBA of Metro Orlando. I further understand that the annual dues of the HBA of Metro Orlando are \$740 for Builder members and \$595 for Associate members.

Payment of dues includes membership in the Florida Home Builders Association (FHBA) and the National Association of Home Builders (NAHB). **Membership in all 3 Associations (HBA, FHBA and NAHB) will take effect upon your final payment.** The 1<sup>st</sup> payment will be processed upon receiving this completed form. Your payments will be processed approximately 30 days from each prior payment in **consecutive months** according to the payment plan below.

Once paid in full, your membership application will be reviewed and approved by the Board of Directors and your company will become an active member of the Association.

\*There is a \$3 admin fee added to each month of your selected payment plan.

HBA of Metro Orlando Payment Plan Information	Builder	Associate	Select Payment Plan
3 payments each	\$249.66	\$201.33	
2 payments each	\$374.50	\$302	

**I agree to the terms and conditions of the HBA of Metro Orlando Payment Plan and understand that my credit card will be on file for the reoccurring payments. Please print information below.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company: \_\_\_\_\_

Payment Plan charge per month \_\_\_\_\_ Payment Options Below (*Payments will be charged on the 15<sup>th</sup> of the month*)

1. Credit Card: MasterCard \_\_\_ Visa \_\_\_ AMEX \_\_\_ Card #: \_\_\_\_\_ Exp: \_\_\_ Sec Code \_\_\_

2. ACH (Automated Clearing House) Bank: \_\_\_\_\_

Checking Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Signature: \_\_\_\_\_

There are no refunds in this program. Partial payments will be considered a donation to the HBA of Metro Orlando in support of the building industry.  
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